

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>11-9-04</u>		2 Serial/Patent # <u>10/654,790</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
<input checked="" type="checkbox"/>	Petition	<i>None</i>	<i>6-14-04</i>	\$ <i>130.00</i>							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
7 TOTAL AMOUNT OF REFUND			\$ <i>130.00</i>								
8 TO BE REFUNDED BY:											
10 REASON:		Treasury Check									
	Overpayment	<input checked="" type="checkbox"/> Credit Deposit A/C #:									
	Duplicate Payment	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>1</td><td>6</td><td>--</td><td>0</td><td>6</td><td>3</td><td>3</td></tr></table>			1	6	--	0	6	3	3
1	6	--	0	6	3	3					
<input checked="" type="checkbox"/>	No Fee Due (Explanation):										
<i>PTO lost the paper</i>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Paul Shanoski</u>		TITLE: <u>Senior Attorney</u>									
SIGNATURE: <u><i>Paul Shanoski</i></u>		PHONE: <u>571-272-1225</u>									
OFFICE: <u>Office of Petitions</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u><i>Olivia Kell</i></u>		DATE: <u>11/10/04</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

10654790
 01/10/04
 130.00
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